	•								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2004 /0/777 040												9 ×		
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OR		R THAN ENTITY		
TOTAL CLAIMS			÷		l ·			RATE	FEE		RATE	FEE	1 V	
F)R	NUMBER FILED		NUMBER EXTRA			BASIC F	EE 395.0	OR	BASIC FEE	790.00	1 7		
TO	TAL CHARGE	minus 20=		•			X\$ 9=		OR	X\$18=		1		
INDEPENDENT CLAIMS			: minus 3 =		•			X44=	- -		You	 - : -	1	
MU	JLTIPLE DEPE	NDENT CLAIM P	RÉSENT							OR		 		
• 14	the difference	io column 1 io	loss than a	ore onto	• • • • • • • • • • • • • • • • • • •	"O" in column 2				OR	+300=			
* If the difference in column 1 is less than zero, enter "0" in column 2 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								TOTA	ـــــا	OR	TOTAL	<u> </u>	•	
								SMAL	L ENTITY	OR	OTHER	THAN ENTITY		
AMENDMENT A		CLAIMS		HIGH	EST		1		ADDI			ADDI-	1 .	
	10/25/05	REMAINING AFTER AMENDMENT		PREVIO	DUSLY	PRESENT EXTRA		RATE	TIONA FEE		RATE	TIONAL	J	
	Total	• 35	Minus	 39	S=0 - 2 - 2	=		X\$ 9=		OR	X\$18=		 	
	Independent	. 8	Minus	*** 8		-		X44=		OR	X88=		1	
<u>.</u>	FIRST PRESENTATION OF MU		ILTIPLE DEPENDENT		CLAIM	CLAIM		+150=			+300=			
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		. (0-1		·······(O-1		···(O-1·················		DDIT. FE		OR	ADDIT. FEE			
		(Column 1)	1	(Colur HIGH		(Column 3)	ſ	<u>. </u>	LADDI	-			ļ	
AMENDMENT B	•	REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	ADDI- TIONA FEE		RATE	ADDI- TIONAL FEE		
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=			
	Independent	*	Minus	***		=	i	X44=		OR	X88=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								 	1				
	·		÷					+150=		OR	+300=_			
						در دو دروس	<u> </u>	TOTAL DDIT: FEE		OR	TOTAL ADOIT: FEE	ACT or interes		
		(Column 1)	• • • • •	(Colun		(Column 3)	•	• 112						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER BUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE] -	RATE	ADDI- TICNAL FEE		
٥	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=-	T-082-610.190		
	Independent	±	Minus	***		=.	*	X44=		1	X88=_			
⋖	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-		- 	OR	÷∨00=		*	
	· · · ·	· .					1	+150=		OR	+300=			
* H	the entry in colur	nn 1 is less than th nber Previously Pa	e entry in colui	mn 2, write S SPACF №	"0" in cob	umn 3. 120. enter "20 "	•	TOTAL		OR	TOTAL			
***	f the "Highest Nu	mber Previously Pa ber Previously Paid	d For IN THIS	S SPACE is	less that	n 3, ente		ODIT. FEE Id in the eq	propriate b	-	DDIT. FEE E mn 1.			